U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2289		2. Fiscal Year Covered From: 07 / 01 / 2003 Through: 06 / 30	2004
3. Name and addres	s of person filing.		Name, file number, and address of labor organization.	
Name Bil	ly R. Bradle	ey	Name Painters Local Union No	. 1144
			Labor Organization File Number 025-750	
P.O. Box, Bldg., Ro	oom No., if any		P.O. Box, Building and Room Number, if any	
Street 710	30th Stree	t	Street 512 33rd Street	
City Parl	cersburg	261011628	City Parkersburg	
State WV		ZIP Code + 4	State WV ZIP Code +	4 261011628

Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in trans- monetary value from an employer who	actions (including loans) wose employees your orga	ith, or derived income or other economic benefit of inization represents or is actively seeking to represent.
6. Name and address of Employer (including	g trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
		7.b. Amount.
Street		
City		
State	ZIP Code + 4	

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

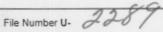
Signed	Bille	1 Bradler
	J	0

on 6/15/05

304-422-2293

Date

Telephone Number



B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (includ	ling trade name, if any).	9. Business deals with:		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State	ZIP Code + 4	a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or Name Trade Name, if any:	r employer's name.	11.a. Nature of such dealing.		
P.O. Box, Bldg., Room No., if any Street		11.b. Approximate dollar value of such dealing.		
City	ZIP Code + 4	12.a. Nature of interest held or income received.		
		12.b. Amount.		

Name and address of Employer or (including trade name, if any).	Labor Relations Consultant	14.a. Nature of payment.	
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State	ZIP Code + 4		
13.b. Is the Business an Employer	or Consultant	14.b. Amount of payment.	